Appl. No

09/438,030

Filed

November 10, 1999

34. (New) A method for treating an occlusive substance from the wall of a blood vessel, comprising:

positioning a distal end of a guidewire having an occlusive device at its distal end proximal to at least a portion of the occlusive substance on the wall of said blood vessel;

introducing an aspiration catheter over said guidewire;

prior to treating the occlusive substance, aspirating through the aspiration catheter while crossing the site of the occlusive substance with both the distal end of the guidewire and a distal end of the aspiration catheter; and

treating the occlusive substance.

- 35. (New) The method of Claim 34, wherein said occlusive device is a balloon.
- 36. (New) The method of Claim 34, further comprising activating said occlusive device to prevent particle migration past said occlusive device prior to said treatment.
- 37. (New) The method of Claim 35, further comprising delivering a therapy catheter to perform therapy on said occlusive substance following activation of said occlusive device.
- 38. (New) The method of Claim 37, wherein said therapy catheter is selected from the group consisting of an angioplasty balloon catheter, a stent delivery catheter and an atherectomy catheter.
- 39. (New) The method of Claim 37, further comprising removing the aspiration catheter from the blood vessel prior to delivering the therapy catheter.
  - 40. (New) A method for treatment of an occlusion in a blood vessel, comprising:

    delivering a guidewire having a distal end until the distal end is distal of said occlusion;

delivering an aspiration catheter until its distal end is proximal to the occlusion; and

crossing the site of the occlusion with the distal end of the aspiration catheter while aspirating.

41. (New) The method of Claim 40, wherein the site of the occlusion is crossed with the distal end of the aspiration catheter in a proximal to distal direction while aspirating.

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42. (New) The method of Claim 41, further comprising crossing the site of the occlusion with the distal end of the aspiration catheter in a distal to proximal direction while aspirating.

43. (New) The method of Claim 42, further comprising repeating said crossing while aspirating in both a proximal to distal and in a distal to proximal direction.

44. (New) The method of Claim 40, further comprising exchanging the guidewire for a guidewire having an occlusive device on its distal end.

45. (New) The method of Claim 44, wherein said exchange occurs through said aspiration catheter.

46. (New) The method of Claim 40, further comprising removing said aspiration catheter and advancing a therapy catheter over said guidewire.

## **REMARKS**

With this response, Claims 3-46 are now pending in the present application. Claims 1 and 2 have been canceled without prejudice. Applicant reserves the right to pursue these claims at a later date. Applicant is enclosing a Supplemental Information Disclosure Statement to correct the prior information disclosure statements filed March 14, 2000 and May 2, 2000 to comply with 37 CFR 1.98(a)(2), and also to submit additional references. By way of the present response, Applicant has amended Claim 3 to overcome the rejection based on Frisbie, as discussed in the Examiner Interview of February 19, 2002, and amended Claim 7 to provide proper antecedent basis, and not for reasons of patentability.

Applicant wishes to thank the Examiner for courtesies extending during the interview of February 19, 2002. As also discussed in that interview, Applicant is submitting the foregoing claims that overcome the prior art of record. Pursuant to the Examiner's indicated allowability of Claim 8, Applicant has added new independent Claim 34 which is similar to Claim 8, and accordingly, Applicant submits that this claim is allowable over Frisbie. Applicant further submits new independent Claim 40 as discussed at the interview, and respectfully submits that this claim is also allowable over Frisbie. Additionally, dependent Claims 35-39 and 40-46 also recite a unique combination of features not taught or suggested by the prior art. Accordingly, Applicant respectfully requests Examiner to withdraw the rejections and allow the currently pending claims.